

Substitute form 1449A/PTO			<i>Complete if Known</i>
INFORMATION DISCLOSURE STATEMENT BY APPLICANT			Application Number 10/594,046
			Filing Date 09/25/2006
			First Named Inventor Ekwuribe, et al.
			Group Art Unit 1614
			Examiner Name Phyllis Spiveck
			Attorney Docket Number 014811.673.119US
(use as many sheets as necessary)			
Sheet	1	1	

US Published Applications

Examiner Initials*	Cite No	Publication No.	Date	Applicant
/P.S./		20080033153	2/7/2008	Riggs-Sauthier et al.

Examiner Signature	/Phyllis Spivack/	Date Considered	02/10/2010
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.